

THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF REVENUE ADMINISTRATION
CORPORATION BUSINESS PROFITS TAX RETURN

1991

OFFICE USE ONLY

For the CALENDAR year 1991 or other tax year beginning and ending
mo day yr mo day yr

Due Date for CALENDAR year is on or before March 16, 1992 or 15th day of 3rd month after the close of the fiscal period.

STEP 1
Place
LABEL HERE
Otherwise,
please print
or type

Name of Corporation

FEDERAL IDENTIFICATION NUMBER

Number and Street

PRINCIPAL BUSINESS ACTIVITY CODE

City or Town, State and Zip Code

Follow federal
instructions**STEP 2**
Federal
Information
and Special
Return Types☐ Check here if the IRS has made any agreed or partially agreed to adjustments for any Federal Income Tax Return filed by the corporation which has not been previously reported to N.H. Years covered by IRS .
Submit changes under a separate cover with form RP-87-C☐ INITIAL RETURN ☐ AMENDED RETURN ☐ FINAL RETURN ☐ SHORT PERIOD RETURN
ONLY CHECK IF THE BOX APPLIES — SEE INSTRUCTIONS**STEP 3****COMPLETE PAGE 2 BEFORE COMPUTING TAX****STEP 4**
Figure
Your Tax4. Adjusted Gross Business Profits (from page 2, line 3) 4.
5. New Hampshire Apportionment Percentage (RP-80, express as a decimal to 6 places) 5.
6. New Hampshire Taxable Business Profits (line 4 × line 5) 6.
7. New Hampshire Business Profits Tax (line 6 × 8%) 7. **STEP 5**
Figure Your
Credits,
Interest
and
Penalties8. Credits: (a) Tax paid with Application for Extension 8(a)
(b) Payments from 1991 Declaration of Estimated Tax. 8(b)
(c) Credit carried over from prior year 8(c)
(d) Credits allowed under 77-A:5 (Attach Form DP-160) 8(d)
(e) Payment made with original return (Amended returns only) . . . 8(e)
(f) Other Credits or payments (Attach schedule) 8(f)
9. Balance of Tax Due (line 7 less line 8). 9.
10. Additions to Tax: (a) Interest 10(a)
(See instructions) (b) Failure to Pay 10(b)
(c) Failure to File 10(c)
(d) Underpayment of Estimated Tax 10(d)
(e) Substantial Understatement 10(e) **STEP 6**
Figure Your
Balance
Due or
Overpayment11. Balance Due (Line 9 plus line 10.) Make check payable to: State of New Hampshire 11.
(If less than \$1.00 do not pay but still file the return)
12. Overpayment (Line 8 less line 7 adjusted by line 10, if applicable) 12.
13. Apply Overpayment to: (a) Credit on 1992 Estimate 13(a)
(b) Refund: 13(b)
(Please allow 12 weeks for processing of your refund)

OFFICE USE ONLY

**THIS RETURN MUST BE ACCOMPANIED BY A LEGIBLE COPY OF THE APPROPRIATE FORM 1120
U.S. CORPORATION INCOME TAX RETURN, PAGES 1 THROUGH 4, CONSOLIDATING SCHEDULES,
AND SUPPORTING SCHEDULES FOR THE SAME TAXABLE PERIOD.**

Under penalties of perjury, I declare that I have examined this return and to the best of my belief it is true, correct and complete. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has knowledge.

Signature of Officer

Date

Signature of Paid Preparer Other than Taxpayer

Date

Title

Preparer's Identification Number

Preparer Address

City or Town, State, and Zip Code



MAIL TO:

DEPT. OF REVENUE ADMINISTRATION
DOCUMENT PROCESSING DIVISION
61 SOUTH SPRING STREET, P.O. BOX 637
CONCORD, NH 03302-0637

REFER TO PAGE 2 LINE-BY-LINE INSTRUCTIONS

- A. Date of Incorporation
mo day yr
- B. Is the corporation filing its tax return on an IRS approved 52/53 week tax year? Yes No
- C. Does the corporation file as part of a unitary group in any other jurisdiction? Yes No
- D. Is this a "combined" business profits tax return? Yes No If yes, do not complete this return. You must file a NH-1120-WE return. See general instructions concerning unitary filers.

1. Gross Business Profits:

- (a) Taxable income before net operating loss deduction and special deductions (See instructions and attach copy of federal return). 1(a)

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If a loss attach form RP-131

NOTE: If line 1(a) shows a loss, Form RP-131 must be filed. Failure to attach Form RP-131 will result in an incomplete return. Initial here if you wish to waive your right to carry forward this year's net operating loss. If you waive this right, you are not required to file Form RP-131.

- (b) Separate entity or passive loss limitation adjustments (see instructions) 1(b)

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- (c) N.H. Gross Business Profits (combine (a) and (b)). 1(c)

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2. Additions and Deductions

- (a) Add back income taxes or franchise taxes measured by income 2(a)

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(Attach schedule of taxes by state)
- (b) "Safe Harbor" or other similar leases (RSA 77-A:4-a) 2(b)

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(Rev. 303.02) (Attach schedule showing computation)
- (c) N.H. Net Operating Loss Deduction (Attach Form RP-132). 2(c)

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- (d) Interest on U.S. obligations 2(d)

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- (e) Wage adjustment required by I.R.C. Section 280C. 2(e)

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- (f) Deductible dividends (See instructions) 2(f)

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- (g) Other non-unitary income net of related expenses 2(g)

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(Attach schedule giving name, Federal I.D. No., and amount by payor)
- (h) Distribution from joint venture or partnerships subject to N.H. taxation . 2(h)

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(Attach schedule giving name, Federal I.D. No., and amount distributed)
- (i) Foreign dividend gross-up (I.R.C. Section 78). 2(i)

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- (j) Research contribution 2(j)

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[See RSA 77-A:4 XII (Attach computation)]
- (k) Combine lines 2(a) through 2(j). 2(k)

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3. Adjusted Gross Business Profits [Line 1(c) as adjusted by line 2(k)] 3.

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THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF REVENUE ADMINISTRATION
BUSINESS PROFITS TAX

Sequence #10

SMALL BUSINESS CORPORATIONS
COMPUTATION OF "S" CORPORATION GROSS BUSINESS PROFITS

FOR CALENDAR YEAR 19 _____

NAME	FEDERAL IDENTIFICATION NUMBER/SOCIAL SECURITY NUMBER
	-

1. Income and Deductions from Federal Form 1120S. Show all losses in brackets, i.e. (50).

- (a) Ordinary Income (loss) from trade or business activities
(Federal Form 1120S, Page 1, Line 21) 1(a)
- (b) Net income (loss) from rental real estate activities
(Federal Form 1120S, Schedule K, Line 2) 1(b)
- (c) Net Income (loss) from other rental activities
(Federal Form 1120S, Schedule K, Line 3c) 1(c)
- (d) Portfolio Income (loss) such as but not limited to
interest, dividend or royalty income
(Federal Form 1120S, Schedule K, Lines 4 a, b, c & f) 1(d)
- (e) Capital gain on the sale of assets
(include IRC Section 1231 gain)
(Federal Form 1120S, Schedule K, Lines 4 d & e, 5) 1(e)
- (f) Other income (loss) from "S" Corporation activities
not included above
(Federal Form 1120S, Schedule K, Line 6) 1(f)
- (g) Other "S" Corporation expenses shown on Federal Form 1120S,
Schedule K, Lines 7, 8, 9 & 10
(Refer to Rev 302.01 for limitations) 1(g)
- (h) Total "S" Corporation Income and Deductions (combine lines 1(a) through 1(g)) 1(h)
2. Other deductions not included in "S" Corporation return allowable to "C" Corporations
under Internal Revenue Code. (Attach supporting schedule) 2
3. "S" Corporation Gross Business Profits or Loss
(Combine line 1(h) and 2. Enter here and on Page 2, Line 1 of NH 1120) 3

FORM

RP-131

REV 11/91

**THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF REVENUE ADMINISTRATION
NET OPERATING LOSS (NOL) ANNUAL REPORT**

USE THIS FORM IF YOUR CURRENT TAX YEAR REFLECTS A LOSS FOR NEW HAMPSHIRE GROSS BUSINESS PROFITS. RSA 77-A:4
REQUIRES THE CARRYBACK OF A NOL FOR THREE YEARS BEFORE ANY AMOUNT IS ELIGIBLE FOR THE FIVE YEAR CARRYFORWARD.
THIS FORM MUST BE ATTACHED TO YOUR NEW HAMPSHIRE TAX RETURN FOR THE YEAR OF LOSS.

For the CALENDAR year 19____ or other tax year beginning ____ and ending ____
mo day yr mo day yr

Taxpayer's Name

Federal Identification No.

1. The amount of the current year's net operating loss (See instructions) 1 (_____)

(A)

Three years prior
to current year
19____

(B)

Two years prior
to current year
19____

(C)

One year prior
to current year
19____

2. N.H. Gross business profits for each of the
prior three years: (Show zero if loss)

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3. LESS: NOL carryback from any year prior to
the current year (if any)

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4. N.H. Gross Business profit after NOL
carrybacks for each year (line 2 minus line 3)
Enter zero if negative

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5. Add lines 4(A), 4(B) and 4(C) 5 _____

6. Combine lines 1 and 5. If the result is zero or greater enter the amount on line 6(A).
If the result is less than zero enter the amount on line 6(B).

(A) Excess prior year income 6(A) _____

(B) Excess Loss 6(B) (_____)

If income appears on line 6(A) STOP here — you do not have a net operating loss to carry forward for the current year.

7. Current year's apportionment percentage from Form RP-80, expressed in decimal form, computed to 6 places 7 _____

8. Apportionment limitations (multiply line 6(B) by line 7) 8 _____

UNITARY FILERS STOP HERE AND REFER TO REV 303.05 AND NH 1120WE FOR INSTRUCTIONS

9. Statutory limitations 9 \$ 250,000

10. N.H. Net Operating Loss (the lesser of line 9 or line 8) 10

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RP-131 NOL ANNUAL REPORT

Instructions

Line 1: Enter this period's net operating loss as defined in the United States Income Tax Regulations relative to I.R.C. Sec 172. If a gain or -0-, **DO NOT** complete Form RP-131. (Business organizations not qualifying for treatment as a Subchapter C corporation under the US IRC should calculate their net operating loss as if the business organization were a Subchapter C corporation.)

Line 2: Enter the amount of the NH gross business profits (Loss) for each of the prior three tax periods. Enter 0 if a loss. Show the earliest year in column A, followed by the next earliest year in column B and then the immediate prior year in column C.

Line 3: Enter the amount of NOL carryback from prior year that was used to offset operating profits in the prior three years (if any). The NOL is effective for losses incurred after 1/1/89.

Line 4: In each of the respective columns; enter the total of line 2 minus line 3. Enter -0- if negative.

Line 5: Enter the total of line 4(A) + 4(B) + 4(C).

Line 6: Combine the amounts on line 1 and line 5. If the result is -0- or greater enter the amount on line 6(A) and STOP HERE. You **DO NOT** have a NOL to carry forward for the current year.

If the result of line 1 and line 5 is less than -0-, enter this amount on line 6(B).

Line 7: Enter on line 7 the current year's NH apportionment percentage from Form RP-80, computed to 6 decimal places.

Line 8: Enter the amount of line 6(B) multiplied by line 7.

Line 9: \$250,000 is the maximum amount that may be carried forward in a loss year.

Line 10: Enter the lesser of line 8 or line 9. This is your NH NOL available from the current year for a five year carryforward.

FICE USE ONLY

**THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF REVENUE ADMINISTRATION
NET OPERATING LOSS (NOL) DEDUCTION**

**WHEN
TO USE
THIS FORM**

Use this form to detail the Net Operating Loss Carryforward amounts included in the current tax year net operating loss deduction taken on Form NH-1120, NH-1040, NH-1065 or NH-1041.

For the CALENDAR year 19 _____ or other taxable year beginning _____ and ending _____
mo day yr mo day yr

Taxpayer's Name

Federal Identification No.

(A) Ending Date of tax year in which NOL occurred, from Form RP-131 Mo Day Yr	(B) NOL amount available for five year carryforward period from Form RP-131, line 10	(C) Amount of NOL carryforward which has been used in tax years prior to this tax year	(D) Amount of NOL to be used as a deduction this tax year	(E) Amount of NOL to carryforward in future years
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5

6. Amount of NOL Carryforward deducted this tax year.
This is the amount to be reported on applicable BPT return.
(Sum of column D lines 1-5)

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NOTE: Column (B) less Column (C) should equal the sum of Column (D) plus Column (E)

IMPORTANT:

A NH Net Operating Loss may be carried forward for five years following the loss year provided, however, that no loss amounts incurred prior to January 1, 1989 shall be used to calculate the NOL Deduction.

OFFICE USE ONLY

FORM

DP-160

Schedule CR

THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF REVENUE ADMINISTRATION
SCHEDULE OF BUSINESS PROFITS TAX CREDITS
RSA 77-A:5

For the CALENDAR year 19____, or other tax year beginning ____ and ending ____

mo day yr mo day yr

Name of Corporation or Partnership, Estate or Trust			Federal Identification Number
Last Name (Proprietorship only)	First Name	Initial	Social Security Number (Proprietorship Only)
Spouse's Last Name (Proprietorship only)	First Name	Initial	Spouse's Social Security Number (Proprietorship Only)

1. Taxes paid pursuant to RSA 83-C Franchise Tax on Public Utilities	1.		
2. Taxes paid pursuant to RSA 84 Taxation of Banks	2.		
3. Taxes paid pursuant to RSA 400-A Taxation of Insurance Companies	3.		
4. Taxes paid pursuant to RSA 83-D Taxation of Nuclear Station Property	4.		
5. Job Creation Tax Credit: (Effective 7/1/92 for taxable periods ending on or after 7/1/92)			
(a) Total Job Creation Tax Credit available (See instructions)	5(a)		
(b) Total NH Business Profits Tax \$ _____ x 5%	5(b)		
(c) Enter the lesser of line 5(a) or 5(b)	5(c)		
6. Capital Expenditure Tax Credit: Effective 7/1/91 for taxable periods ending on or after 7/1/91 but only for capital expenditures incurred on or after 7/1/91			
(a) Total Capital Expenditure Tax Credit available (See instructions) . . .	6(a)		
(b) Total NH Business Profits Tax \$ _____ x 5%	6(b)		
(c) Enter the lesser of line 6(a) or 6(b)	6(c)		
7. Community Development Authority Credit (See instructions)	7.		
8. Total Credits allowable, pursuant to RSA 77-A:5 (Sum of Line 1 through Line 7)	8.		
9. Total NH Business Profits Tax	9.		
10. Total amount of allowable credits (Enter the lesser of line 8 or line 9)	10.		

Total amount of these credits shall not exceed the tax due under RSA 77-A.